

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Sm</i>		10/5/00
O.I.P.E. CLASSIFIER		48	10/12/00
FORMALITY REVIEW		67803	11-15-00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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